## $b_1$

### **Authorization Basis Amendment Request**

Page 1 of 2

ABAR Title: Unrestricted Area Dose Rates									
ABAR #:	ABAR-W375-00-00011	Revision:	0	Associated ABCN #:	ABCN-W375-00-00016				
Originator:	Thomas R. McDonnell	Date:		19 May 2000					
	Print Name				•				

#### Description of proposed revision:

- 1. Clarifies statement in ISMP section 3.9.1.2 to note that ALARA features are shown on applicable facility layout drawings and other design documents not on one specific "set of radiation protection drawings."
- 2. Replaces reference to ISMP sections 2.3 and 3.91.2 as implementing standards in SRD Vol. II Safety Criterion 2.0-3 with G-10 CFR 835/B2, Occupational ALARA Program.

#### Reason(s) for the proposed revision:

1. ISMP section 3.9.1.2 currently states, in part:

"A set of radiation protection drawings is prepared showing the facility zoning and the minimum shielding requirements and access control features."

This ISMP section is being reworded to clarify the original intent that these features are to be documented on applicable facility layout drawings and other design documents. Approval of this portion of the ABAR will close out DR-W375-99-QA00065, which is related to QA Surveillance Report SV-W375-QA00007 (CCN 00401).

2. The implementing standard is being revised to G-10 CFR 835/B2 as part of the effort to remove references to the ISMP as implementing standards in the SRD.

#### Description of the proposed implementation schedule:

The changes to the SRD and ISMP will be incorporated within 30 days of RU approval of this ABAR.

If the revision involves the deletion or modification of a standard previously identified in the approved SRD, provide:

- A. An evaluation that demonstrates the revised SRD continues to identify a set of standards that will provide adequate safety, comply with all applicable laws and regulations, and conform to top-level safety standards; and
- B. A certification that the revised SRD identifies a set of standards that continues to provide adequate safety, comply with all applicable laws and regulations, and conform to top-level safety standards.

#### Attachments:

- 1. Copies of the AB document(s) or appropriate excerpt showing the proposed revision(s).
- 2. Copy of safety evaluation.
- 3. If not included above, justification for the revision and demonstration that the revision is safe.
- 4. Items A and B above, if applicable.

# $b_1$

### **Authorization Basis Amendment Request**

Page 2 of 2

ABAR Title	e: Unrestricted Area Dose Rates				
ABAR #:	ABAR-W375-00-00011	Revision:	0	Associated ABCN #:	ABCN-W375-00-00016
Originator:	Thomas R. McDonnell	Date:		19 May 2000	
	Print Name				_
Manager	r, Engineering		Date		
Radiolog	gical, Nuclear, and Process Safety I		Date		
Manager	r, Quality Assurance		Pate		
Chairma	n, Project Safety Committee				Pate
RPP-W7	TP General Manager				Date